



Attorney Docket No. 032016-0127



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicants: Witt et al.  
  
Title: SYSTEM AND  
METHOD FOR  
WARMING FOOD  
  
Application No.: To be determined  
  
Filing Date: To be determined  
  
Examiner: To be determined  
  
Art Unit: To be determined  
  
Attorney Docket No.: 032016-0127

<b>CERTIFICATE OF EXPRESS MAILING</b>	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.	
EL 979075930 US	1/23/04
(Express Mail Label Number)	(Date of Deposit)
Carolyn Simpson	
(Printed Name)	
	
(Signature)	

Mail Stop **PATENT APPLICATION**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

**UTILITY PATENT APPLICATION**  
**TRANSMITTAL**

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Allan Witt  
2585 Eagle Ridge Lane  
Lenoir, North Carolina 28645

William Citti  
19505 Warwick Drive  
Brookfield, Wisconsin 53045

David Rolston  
8411 N. Indian Creek Parkway  
Milwaukee, Wisconsin 53217

☒ Applicants claim small entity status under 37 C.F.R. § 1.27.

Enclosed are:

- ☒ Application Data Sheet (37 C.F.R. § 1.76) (4 pages).
- ☒ Specification, Claim(s), and Abstract (16 pages).
- ☒ Formal drawings (4 sheets, Figures 1, 2, 3, 4, 5, 6).
- ☒ Executed Declaration and Power of Attorney (6 pages).
- ☒ Information Disclosure Statement (2 pages).
- ☒ Form PTO/SB/08 with copies of 3 listed reference(s).
- ☒ Petition to Make Special Under 37 C.F.R. § 1.102(c) (2 pages).
- ☒ Statement of Facts in Support of Petition to Make Special Because of Applicant's Age (M.P.E.P. § 708.02) (1 page) with notarized copy of Applicant's Birth Certificate (1 page).

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$770.00 =	\$770.00
Total Claims:	42	- 20	= 22 x	\$18.00 =	\$396.00
Independents:	10	- 3	= 7 x	\$86.00 =	\$602.00
If any Multiple Dependent Claim(s) present:			+	\$290.00 =	\$0.00
				SUBTOTAL: =	\$1768.00
<input checked="" type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):				=	\$884.00
				TOTAL FILING FEE: =	\$884.00

☒ Check No. 13559 in the amount of \$884.00 to cover the filing fee is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date Jan 23, 2004

By Scott C. Nielson

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